

Plaintiff: (Name [first, middle, last], Address, City, State, Zip)

☐ See attached for additional plaintiffs.☐ Amended**-VS-**

To: Defendant(s) : (Name [first, middle, last], Address, City, State, Zip)

☐ See attached for additional defendants.**Summons and Complaint
Small Claims**

Case No. _____

- ☐ Claim for money (\$10,000 or less) 31001
☐ Return of property (replevin) 31003
☐ Eviction 31004
☐ Eviction due to foreclosure 31002
☐ Arbitration award 31006
☐ Return of earnest money 31008
☐ Tort/Personal injury (\$5,000 or less) 31010

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ at least 10 working days prior to the scheduled court date. Please note that the court does not provide transportation.

SUMMONS**To the Defendant(s):**

You are being sued as described on the attached complaint. If you wish to dispute this matter:

- ☐ You must appear at the time and place stated.

AND/OR (Clerk will circle one)

- ☐ You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

When to Appear/File an Answer

Date	Time
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Place to Appear/File an Answer

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Clerk/Attorney Signature

Date Summons Issued

Date Summons Mailed

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

Plaintiff: (Name [first, middle, last], Address, City, State, Zip)

-vs-

☐ See attached for additional plaintiffs.

To: Defendant(s) : (Name [first, middle, last], Address, City, State, Zip)

☐ See attached for additional defendants.**COMPLAINT****Plaintiff's Demand:**

The plaintiff states the following claim against the defendant(s):

1. Plaintiff demands judgment for: *(Check as appropriate)*

- ☐ Claim for Money \$ _____
☐ Eviction
☐ Eviction due to foreclosure
☐ Return of Earnest Money
☐ Return of property (replevin) *(Describe property in 2 below.) (Not to include Wis. Stats. 425.205 actions to recover collateral.)*
☐ Confirmation, vacation, modification or correction of arbitration award.
☐ Tort/Personal injury \$ _____

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.

2. Brief statement of dates and facts:

(If this is an eviction action and you are seeking money damages, you must also state that claim on this form.)

☐ See attached for additional information. Provide copy of attachments for court and defendant(s).**Verification:** Under oath, I state that the above complaint is true, except as those matters stated upon information and belief, and as to those matters, I believe them to be true.

State of _____
 County of _____
 Subscribed and sworn to before me on _____

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: _____

I am the: ☐ plaintiff. ☐ attorney for the plaintiff.

Signature of Plaintiff or Attorney

Date

Plaintiff's/Attorney's Telephone Number

Attorney's State Bar Number

Law Firm and Address